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PROCTER & Form 4 March 13, 20	a GAMBLE CO												
	Λ										PPROVAL		
FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549							OMB Number:	3235-0287					
subject to				GES IN BENEFICIAL OWNERSHIP OF SECURITIES						Expires: Estimated a burden hou response	irs per		
Form 5 obligation may conti <i>See</i> Instru- 1(b).	s Section 17(a		blic Uti	lity H	oldi	ing Com	pany	Act o	ge Act of 1934, f 1935 or Sectio 40	·	0.0		
(Print or Type R	esponses)												
SNYDERMAN RALPH Symbol			ymbol	uer Name and Ticker or Trading 1 CTER & GAMBLE CO [PG]					5. Relationship of Reporting Person(s) to Issuer (Check all applicable)				
				e of Earliest Transaction h/Day/Year) /2008					_X_ Director Officer (give title10% Owner Other (specify below)Other (specify				
	(Street)	4. If Amendment, Date Original Filed(Month/Day/Year)					 6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person 						
DURHAM,	NC 27710								Form filed by M Person	More than One Re	eporting		
(City)	(State) (Zip)	Table	I - Nor	n-De	erivative S	Securi	ties Ac	quired, Disposed of	f, or Beneficia	lly Owned		
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)		Date, if	Code (Instr.	8)	4. Securit nAcquired Disposed (Instr. 3, Amount	(A) o of (D 4 and (A) or)	Securities Beneficially	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
Common Stock	03/11/2008			А		503	A	\$0	40,324.223	D			

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

 Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned

 (e.g., puts, calls, warrants, options, convertible securities)

1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	4. Transactio Code (Instr. 8)	5. oriNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		ate	Amou Under Secur	le and unt of rlying ities . 3 and 4)	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Owno Follo Repo Trans (Instr
			Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

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Reporting Owners

Reporting Owner Name / Address		Relationships						
r g	Director	10% Owner	Officer	Other				
SNYDERMAN RALPH DUKE UNIVERSITY MEDICAL CENTER 2424 ERWIN ROAD, SUITE 1101 DURHAM, NC 27710	R X							
Signatures								
/s/ Jason P. Muncy - Attorney-in-Fact	03/12/2008							
** Signature of Reporting Person	Date							

Explanation of Responses:

* If the form is filed by more than one reporting person, see Instruction 4(b)(v).

** Intentional misstatements or omissions of facts constitute Federal Criminal Violations. See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure. Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.